

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE

2008 OCT 20 PM 1:21

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE FOR REELECTION OF BRIAN MICKELSON

IMPORTANT: Indicate by # type of committee you are reporting for: 5

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

BRIAN MICKELSON

Political Party (if applicable)

REPUBLICAN

Office Sought

WEBSTER COUNTY SHERIFF

District (If Senate or House)

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Dennis Lehrkamp
SIGNATURE OF PERSON FILING REPORT

(515) 356 2324
TELEPHONE

10-15-08
DATE SIGNED

I AM FILING A July 15 To Oct 14 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

Nov 4 2008

County & Local Committees, enter County in
which Election is held

WEBSTER

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

6122.50

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

3892.50

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

2230.00

**UNPAID BILLS (From Schedule D - Attach Schedule D).....\$

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES X NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE FOR REELECTION OF BRIAN NICKELSON

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7-29-08	ID# CK# 5839	DONALD WOODRUFF 1649 JONATHAN DR FORT DODGE IOWA 50501		\$ 100	<input type="checkbox"/>
7-29-08	ID# CK# 4376	DONALD CHRISTOPHERSON 2667 SAMPSON AVE DUM COMBE IA 50532		200	<input type="checkbox"/>
8-29-08	ID# CK# 4186	RASCH FARMS & SUPPLIES 1834 JOHNSON AVE FORT DODGE IA 50501		100	<input type="checkbox"/>
9-2-08	ID# CK# 7317	L.E. BROBST 2931 21ST AVE N FORT DODGE IOWA 50501		100	<input type="checkbox"/>
9-2-08	ID# CK#	BETTY NICKELSON 3337 190TH ST DUM COMBE IA 50502 (CASH)	MOTHER	100	<input type="checkbox"/>
9-4-08	ID# CK# 805	DR BILL RYAN 1874 IOWA AVE FORT DODGE IOWA 50501		150	<input type="checkbox"/>
9-2-08	ID# CK#	ANDY ANDERSON 2601 190TH ST FT. DODGE IA 50501 (CASH)		20	<input type="checkbox"/>
9-12-08	ID# CK# 5495	JAMES MOENCH 704 CREST AVE FORT DODGE IA 50501		50	<input type="checkbox"/>
9-12-08	ID# CK# 4509	LARRY LEITING 1503 12TH AVE N FORT DODGE IOWA 50501		50	<input type="checkbox"/>
9-19-08	ID# CK#	ROBERT GLASER 1113 COLONIAL DR FT DODGE IA 50501 (CASH)		100	<input type="checkbox"/>
SUB-TOTAL				\$ 970	
TOTAL (if last page of this schedule)				\$	

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Page 1 of 12
(for Schedule A)

For Instructions, See Back of Form



CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE FOR REFLECTION BRIAN MICKELSON

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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9-19-08	ID# CK# 1331	BERNARD AJTEN 23901 235 TH AVE FORT DODGE IA 50501		\$ 20	<input type="checkbox"/>
9-19-08	ID# CK# 3932	PHIL TURNER 1604 N 29 TH ST FORT DODGE IA 50501		50	<input type="checkbox"/>
9-19-08	ID# CK# 8606	ALVIN ISAKSON 2652 235 TH ST DUNCOMBE IA 50532		30	<input type="checkbox"/>
9-19-08	ID# CK# 2771	J. MICK FLAHERTY 1099 KENYON RD FORT DODGE IA 50501		25	<input type="checkbox"/>
9-19-08	ID# CK# 3186	MICHAEL DEBRVIN 1109 LYNH ST. Box 380 GOWRIE IA		25	<input type="checkbox"/>
9-19-08	ID# CK# 18118	WILLIAM HANSON 153 PARKWOOD COURT FT. DODGE IA 50501		50	<input type="checkbox"/>
9-19-08	ID# CK# 4331	DEAN CARDEN 2226 UNION AVE DUNCOMBE IA 50532		20	<input type="checkbox"/>
9-19-08	ID# CK# 8416	RUTH SCHMALENBERGER 100 FRIENDSHIP CIRCLE FT. DODGE IA 50501		20	<input type="checkbox"/>
9-19-08	ID# CK# 940	GENE BALCK 1343 220 TH ST BARNUM IA 50518		25	<input type="checkbox"/>
9-19-08	ID# CK# 613	RICHARD STARK JR 651 OCEAN AVE BOCA RATON FLA 33432		100	<input type="checkbox"/>
SUB-TOTAL				\$ 365	1335
TOTAL (If last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form



CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE		MONETARY RECEIPTS
A (Rev. 07/03)		
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE FOR REELECTION OF BRIAN MICKELSON

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9-19-08	ID# CK# 10170	STEVEN SCHMALENBERGER 3164 120TH ST VINCENT IA 50594		\$ 50	<input type="checkbox"/>
9-19-08	ID# CK# 8626	BRUNER FINANCIAL 1099 KENYON RD FT DODGE IA 50501		25	<input type="checkbox"/>
9-19-08	ID# CK# 2453	DENNIS AMMAN 2823 230TH ST DUNCOMBE IA 50532		100	<input type="checkbox"/>
9-19-08	ID# CK# 10624	DALE DECKER 816 NORTHROP DR FT. DODGE IA 50501		25	<input type="checkbox"/>
9-19-08	ID# CK# 1103	GARNITA JOHNSON 1814 8TH AVE N FT. DODGE IA 50501		25	<input type="checkbox"/>
9-19-08	ID# CK#	JOHN SCHMALENBERGER 317 S 8TH ST FT. DODGE IA 50501 (CASH)		2	<input type="checkbox"/>
9-19-08	ID# CK# 2374	RICHARD HERSOM 2218 LAKEWOOD TR. FT DODGE IA 50501		25	<input type="checkbox"/>
9-19-08	ID# CK# 1097	R.D. SNELL 1922 XAVIER AVE DUNCOMBE IA 50532		25	<input type="checkbox"/>
9-19-08	ID# CK#	HERB CONLON 1636 10TH AVE N FT DODGE IA 50501 (CASH)		50	<input type="checkbox"/>
9-19-08	ID# CK# 8168	DONALD DOOLITTLE 3229 280TH ST DUNCOMBE IA 50532		25	<input type="checkbox"/>
SUB-TOTAL				\$ 352	1687
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Comm. For REElection of BRIAN MICKELSON

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9-19-08	ID# CK# 9927	JOANNE PLINER 719 MORTIMER AVE CALLENDER IA 50523		\$ 20	<input type="checkbox"/>
9-19-08	ID# CK# 19474	DR. OR MRS SAHAI 709 WHITE POST DRIVE WEBSTER CITY IA 50595		100	<input type="checkbox"/>
9-19-08	ID# CK# 2573	GREGG HORA 1730 RIVER FOREST DRIVE FORT DODGE IA 50501		75	<input type="checkbox"/>
9-19-08	ID# CK# 12436	JOHN WINNINGER 3064 210TH ST DUNCOMBE IA 50532		30	<input type="checkbox"/>
9-19-08	ID# CK# 7327	WAYNE MEMANUS 2870 150TH ST VINCENT IA 50594		50	<input type="checkbox"/>
9-19-08	ID# CK# 6518	RICKEY SALOCKER 2021 WESTWOOD ACRES DR. FT DODGE IA 50501		100	<input type="checkbox"/>
9-19-08	ID# CK# 1253	RICHARD MERRILL 2771 170TH ST FT. DODGE IA 50501		50	<input type="checkbox"/>
9-19-08	ID# CK# 1803	HARALD ANDERSEN P.O BOX 98 DUNCOMBE IA 50532		25	<input type="checkbox"/>
9-19-08	ID# CK# 7918	MAURICE FIELD 1772 240TH ST MOORLAND IA 50566		25	<input type="checkbox"/>
9-19-08	ID# CK# 4318	RANDY FISHER 2025 WESTWOOD ACRES DR FT DODGE IA 50501		60	<input type="checkbox"/>
SUB-TOTAL				\$ 535	2222
TOTAL (If last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Comm. For REElection of BRIAN MICKELSON

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9-19-08	ID# CK# 9780	NORMA NARBROWN 222 ELMHURST AVE FT. DODGE IOWA 50501		\$ 25	<input type="checkbox"/>
9-19-08	ID# CK# 2901	DENCK LAU AUCTION 2019 GREENBRIER DR FT DODGE IA 50501		25	<input type="checkbox"/>
9-19-08	ID# CK# 3270	LARRY LAW 2776 230TH ST DUNCOMBE IA 50532		100	<input type="checkbox"/>
9-19-08	ID# CK# 1570	THOMAS HOYT 1350 YANKEE AVE EAGLE GROVE IA 50533		20	<input type="checkbox"/>
9-19-08	ID# CK# 9982	JIM LEGUOLD 3105 130TH ST VINCENT IA 50594		50	<input type="checkbox"/>
9-22-08	ID# CK# 1459	DENNIS JOHNSON 1246 N 24TH PL FT DODGE IA 50501		25	<input type="checkbox"/>
9-22-08	ID# CK# 9517	DALE RICKE P.O. Box 148 VINCENT IA 50594		100	<input type="checkbox"/>
9-22-08	ID# CK# 3316	STEVEN J DANIEL 2188 160TH ST FT. DODGE IA 50501		100	<input type="checkbox"/>
9-22-08	ID# CK#	DURNE ENGELS 106 S 3RD ST VINCENT IA 50594 (CASH)		20	<input type="checkbox"/>
9-22-08	ID# CK# 1909	KENNETH FULLER 209 S 19TH ST FT DODGE IA 50501		20	<input type="checkbox"/>
SUB-TOTAL				\$ 485	2707
TOTAL (If last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Comm FOR REElection OF BRIAN Mickelson

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9-22-08	ID# CK# 10163	John DENCER LAW P.O. Box 1440 FT. DODGE IA 50501		\$ 100	<input type="checkbox"/>
9-23-08	ID# CK# 3046	PHILLIP GUNDERSON 1601 N 15TH ST FT. DODGE IA 50501		150	<input type="checkbox"/>
9-23-08	ID# CK# 2302	JAMES REED 1858 IOWA AVE FT. DODGE IA 50501		50	<input type="checkbox"/>
9-23-08	ID# CK# 892	THOMAS SCHNURR 1631 JONATHAN DR. FT. DODGE IOWA 50501		25	<input type="checkbox"/>
9-25-08	ID# CK#	KATI & Tom KREGER 723 ELIZABETH AVE FT DODGE IA 50594 (CASH)		50	<input checked="" type="checkbox"/>
9-25-08	ID# CK#	KEVIN DOTY 1450 20TH AVE N FT. DODGE IA 50501 (CASH)		50	<input checked="" type="checkbox"/>
9-25-08	ID# CK#	BRAD KOESTER 1738 XAVIER AVE DUMCAMBE IA 50532 (CASH) COUSIN		25	<input checked="" type="checkbox"/>
9-25-08	ID# CK#	FLORENCE KOESTER 1619 NTH 11TH ST FT DODGE IOWA 50501 (CASH) AUNT		25	<input checked="" type="checkbox"/>
9-25-08	ID# CK#	UNKNOWN COLLECTION BOX (CASH)		199.50	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 8750	ALICE WILES 1938 STADIUM DR FT DODGE IA 50501		20	<input checked="" type="checkbox"/>
SUB-TOTAL				\$694.50	3401.50
TOTAL (If last page of this schedule)				\$	

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Page 6 of 12
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Comm. For Re-election of BRAIN Mickelson

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9-25-08	ID# CK# 16256	Leo Goebel 1543 VINCENT AVE VINCENT IA 50594		\$ 25	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 6283	MRS Hoyt Allen 100 PARKWOOD CIR FT. DODGE IA 50501		25	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 6674	RICHARD JOHNSON BOX 51 GOWIE IA 50543		35	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 4752	RICHARD INMAN 1128 SUMMIT AVE FT DODGE IA 50501		35	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 5543	SUE DUVALL 3029 14TH AVE N FT. DODGE IA 50501		35	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 10400	JAMES BOCKEN 1385 N 14TH ST FORT DODGE IA 50501		100	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 3751	J.P. MANSFIELD III 1625 5TH AVE S FT DODGE IA 50501		50	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 28033	DR. ANDREW & DAVID SONKSEN 1716 1ST AVE S FT DODGE IA 50501		100	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 12517	JAMES KERSTEN 1442 14TH AVE N FT. DODGE IA 50501		100	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 6721	MARY LOU MICKELSON 2027 XAVIER AVE DUMCOMBE IA 50532	AUNT	50	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 555	3956.50
TOTAL (if last page of this schedule)				\$	

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Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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Comm For REElection of BRIAN MICKELSON

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9-25-08	ID# CK# 10161	DAVID A TJEPKES 1610 LINCOLN GOWIE IA 50543		\$ 50	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 3220	TOM HOVEY 2396 110TH ST BADGER IA 50516		25	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 3312	ROBERT KINNE 1451 XAVIER AVE EAGLE GROVE IA 50533		25	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 5091	HOWARD HEPBURN 1926 3RD AVE N FT DODGE IA 50501		50	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 8347	ALAN WOOTERS 1006 PARK ST GOWRIE IA 50543		50	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 3193	REX RAINE 2602 15TH AVE N FT DODGE IA 50501		30	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 9440	BOB BOCKEN P.O Box 1313 FT DODGE IA 50501		100	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 6217	JOHN WHITE P.O Box 546 FT DODGE IA 50501		50	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 14377	FOREST MILLIKEN 2481 238TH AVE OTH0 IA 50569		100	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 6405	RICHARD NELSON 813 N 23RD ST FT DODGE IA 50501		20	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 500	4456.50
TOTAL (If last page of this schedule)				\$	

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Page 8 of 12
(for Schedule A)

For Instructions, See Back of Form



CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Comm For Re-Election of Brian Mickelson

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9-25-08	ID# CK# 5849	ROGER SCHULZE 2004 150 th ST FT. DODGE IA 50501		\$ 40	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 3942	PHIL TURNER 1604 N 29 th ST FT. DODGE IA 50501		25	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 5564	KEN HINRICHS 725 CEDAR ST DUNCOMBE IA 50532	BROTHER IN LAW	100	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 8783	GARY TUSSING 1337 JOHNSON AVE CLARE IA 50524		50	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 5454	JIM O'BRIEN 1902 2 nd AVE N FT DODGE IA 50501		50	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 2133	PATSY MICKELSON 2941 QUAIL AVE LEHIGH IA 50557	AUNT	100	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 6344	JOE MARTIN 1408 CARTER AVE CLARE IA 50524		25	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 8718	ROBERT GLASER 1113 COLONIAL DR FT DODGE IA 50501		100	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 2001	JAMES TIERNAN JR 232 10 th AVE N FT DODGE IA 50501		50	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 2472	PAUL JOHNSON P.O. Box 145 GOWRIE IA 50543		25	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 565	5021.50
TOTAL (if last page of this schedule)				\$	

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Page 9 of 12
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Comm For Re-election of BRIAN MICKELSON

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9-25-08	ID# CK# 5089	CLIFFORD MICKELSON 3252 210th ST DUNCOMBE IA 50532	COUSIN	\$ 100	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 8596	JANE RASCH 1834 JOHNSON AVE FT DODGE IA 50501		100	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 16969	Leo CRIMMINS 1207 N 22ND ST FT DODGE IA 50501		50	<input checked="" type="checkbox"/>
9-25-08	ID# CK# 3928	DARRELL KOESTER 2944 190th ST DUNCOMBE IA 50532		25	<input checked="" type="checkbox"/>
9-26-08	ID# CK# 7516	JOHN FEJOLD 3976 INDIANA AVE GOWRIE IA 50543		20	<input type="checkbox"/>
9-26-08	ID# CK# 6394	BILL McCARTEN P.O. Box W FT. DODGE IA 50501		25	<input type="checkbox"/>
9-26-08	ID# CK# 1551	ELBA LAKE 1227 N 24TH PL FT DODGE IA 50501		30	<input type="checkbox"/>
9-26-08	ID# CK# 7611	SHANE HARRISON P.O. Box 143 VINCENT IA 50594		50	<input type="checkbox"/>
9-22-08	ID# CK# 1518	JACK SEWARD JR 2030 Hemlock Ave WEST CHESTER IA 52359		50	<input type="checkbox"/>
9-29-08	ID# CK#	CLARA KROG 1243 VASSE AVE (CASH) VINCENT IA 50594		20	<input type="checkbox"/>
SUB-TOTAL				\$ 470	5491.50
TOTAL (If last page of this schedule)				\$	

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Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for ~~the~~ ^{Reelection} of BRIAN MICKELSON

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9-29-08	ID# CK#	LARRY DENCLAU 1594 XAVIER AVE (COAH) EAGLE GROVE IA 50533		\$ 40	<input type="checkbox"/>
9-29-08	ID# CK# 5128	BRUCE KENTFIELD P.O. Box 1692 FT. DODGE IA		50	<input type="checkbox"/>
9-29-08	ID# CK# 6213	JOEL MICKELSON 1229 XAVIER AVE EAGLE GROVE IA 50533		25	<input type="checkbox"/>
9-29-08	ID# CK# 16570	A.D. WILL 107 N THIRD ST VINCENT IA 50594		30	<input type="checkbox"/>
9-29-08	ID# CK# 1932	DALE COCHRAN 15315 MONROE CT. URBANDALE IA 50323		50	<input type="checkbox"/>
9-29-08	ID# CK# 4152	ROGER SWASAND 2905 OAK TREE CIR FT. DODGE IA 50501		50	<input type="checkbox"/>
10-1-08	ID# CK# 2247	GERALD ASCHERL 2744 190TH ST FT. DODGE IA 50501		15	<input type="checkbox"/>
10-1-08	ID# CK# 5363	DON HEDDINGER 937 12TH AVE N FORT DODGE IOWA 50501		25	<input type="checkbox"/>
10-1-08	ID# CK# 2248	D.L. ZIERKE 1314 9TH AVE S FT DODGE IA 50501		25	<input type="checkbox"/>
10-1-08	ID# CK# 4468	DAVID MESSERLY 1402 VINCENT AVE VINCENT IA 50594		100	<input type="checkbox"/>
SUB-TOTAL				\$ 410	5901.50
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE FOR REELECTION OF BRIAN MICKELSON

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/2/08	ID# CK#	KATHY HANSEL 15 2ND ST S.E. BADGER IA 50516 (CASH)		\$ 21	<input type="checkbox"/>
10/2/08	ID# CK# 6010	R.H. METIER 712 KENYON RD APT 308 FT. DODGE IA 50501		25	<input type="checkbox"/>
10/7/08	ID# CK# 2592	GARLAND HANSON 707 MORTIMER CALLENDER IA 50523		50	<input type="checkbox"/>
10/7/08	ID# CK#	MERV BLOOMQUIST 2192 120TH ST FT DODGE IA 50501 (CASH)		50	<input type="checkbox"/>
10/9/08	ID# CK# 3731	DANIEL HANSON 1208 300TH ST CALLENDER IA 50523		25	<input type="checkbox"/>
10/14/08	ID# CK# 6873	ROBERT STARK 2038 160TH ST FT. DODGE IA 50501		50	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 221.00

TOTAL (if last page of this schedule)

\$6122.50

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(for Schedule A)

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE FOR RE-ELECTION OF BRIAN MICKELSON

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9-10-08	ID# CK# 1	POSTMASTER VINCENT IA 104 N 1ST ST VINCENT IA 50944	COST OF STAMPS FOR MAILINGS	\$ 210
9-19-08	ID# CK# 2	MESSANGER PRINTING 712 1ST AVE FT DODGE IA 50501	COST OF ELECTION CARDS	623.03
9-19-08	ID# CK# 3	FT. DODGE MESSANGER 713 CENTRAL AVE FT. DODGE IA 50501	COST OF PAPER AND FOR STARLIGHT FUNDRAISER	336.72
9-28-08	ID# CK# 4	ROBERT MADDOX 62 CAROLINE DR BOYCE LA. 71409	COST OF PLASTIC SIGNS WOOD, METAL STANDS FOR RE-ELECTION SIGNS	1253.00
9-28-08	ID# CK# 5	STARLIGHT VILLAGE BEST WESTERN JCT HWYS 78/69 FORT DODGE IA 50501	COST OF ROOM COST FOR FOOD TRAY FUNDRAISER	69.23
9-28-08	ID# CK# 6	DIXIE BLUEPRINT SERVICES 1725 ELLIOTT ST ALEXANDRIA LA. 713	COST OF PRINTED BALLOONS FOR PARADE & HANDOUT	340.12
9-28-08	ID# CK# 7	JIM OBRJEN 1902 2ND AVE FT DODGE IA 50501	COST OF RIBBON & WEIGHTS AT PARTY PRODUCTION FOR BALLOONS	35.68
9-29-08	ID# CK# 8	BUSH SIGNS P.O. BOX 9328 MONTGOMERY ALA 36108	COST OF 150 MORE SIGNS FOR RE-ELECTION	540.00
SUB-TOTAL				\$ 3407.78
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.6(3)(i).)

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE

B

(Rev. 07/03)

MONETARY
EXPENDITURES☐ CHECK THIS BOX IF
AMENDING FORM

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee For Re-election of BRIAN MICKELSON

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-2-08	ID# CK# 9	POSTMASTER VINCENT 104 4TH 1ST ST VINCENT IA 50594	MAILING OF COMM. CHECK FOR SIGNS FOR CANDIDATE CERTIFIED LETTER	\$ 9.62
10-7-08	ID# CK# 10	JIM O'BRIEN 1902 2ND AVE N FT. DODGE IA 50501	TAPK & NOZZLE FOR BALLOONS	104.10
10-9-08	ID# CK# 11	ONE OF A KIND SIGNS 223 2ND ST N.W. FORT DODGE IA 50501	COST OF FLOURESENT LETTERING SIGNS RENT OF 3 4x8 SIGNS	371.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 484.72
TOTAL (if last page of this schedule)				\$ 3892.50

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE FOR REELECTION OF BRIAN MICKELSON

Reel Form

SCHEDULE
E
(Rev. 06/97)

IN-KIND
CONTRIBUTIONS

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
8-11-08	ROBERT MADDOX 62 CAROLINE DR BOYCE LOUISIANA 71409		50 24X48 PLASTIC SIGNS	\$ 220.00	<input type="checkbox"/>
8-12-08	ROBERT MADDOX 62 CAROLINE DR BOYCE LOUISIANA 71409		50-24X48 PLASTIC SIGNS	220.00	<input type="checkbox"/>
8-12-08	ROBERT MADDOX 62 CAROLINE DR BOYCE LOUISIANA 71409		15 PLASTIC SIGNS	206.25	<input type="checkbox"/>
8-12-08	LARRY COBEY 2028 NICOLE RD FT DODGE IA 50501		PAINT & LUMBER	560.00	<input type="checkbox"/>
8-12-08	ERNIE KERSTEN 1609 220 ST FT DODGE IA 50501		LUMBER PAINT FOR SIGNS	561.13	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$

1767.38

TOTAL (if last
page of this
schedule)

\$

1767.38

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule E)